## MAP or TEXT AMENDMENT APPLICATION

WESTPORT PLANNING AND ZONING COMMISSION

		OFFICE USE ONLY
		Application #Submission Date:
TEXT CHANGES APPLICAT	ION	Receipt Date:
Complete #1- #3 Only & See Pg2 for Requ	uirements:	Amount Fee Paid:
■ TEXT – AMENDMENT TO ZONING REGULATION ■ TEXT – AMENDMENT TO TOWN PLAN CONSERV	ATION AND OF D	
1. Applicant's Name: Redniss and Mead c/o Richar		
Applicant's Address: 22 First Street - Stamfore	d, CT 06905 <sub>E</sub>	-mail: rick.redniss@rednissmead.com
2. Text Section Added or Modified: Mod Sec 4-5 & 5 Add Se	ec 32-26 (Prior Text A	mendment #774 Submitted: 8/2019 Withdrawn: 11/2019)
3. Estimated time needed for presentation: 20 Minutes		
		Complete # 1- #14, See Pg2&3 for Requirements.
<ul> <li>■ MAP – AMENDMENT TO ZONING REGULATION:</li> <li>■ MAP – AMENDMENT TO PLAN OF CONSERVATION:</li> </ul>		LOPMENT
3. Property Address: N/A		
4. Property ID# (9 Digits - staff will provide) N/A		
5. Existing Zoning District/Plan Designation: N/A		
6. Proposed Zoning District/ Plan Designation: N/A		
7. Lot Area: <b>N/A</b>		
8. Property Owner: N/A	D	aytime Tel: N/A
Owner's Address: N/A		-mail: <b>N/A</b>
9. Agent's Name (if different): N/A		aytime Tel: N/A
Agent's Address: N/A		mail: N/A
10. Zoning Board of Appeals Case # (if any): N/A		
11. A previous zone change/land use designation has   If change was previously requested, indicate date (s)		
12. A List or A Map showing each ZBA Variance Case Nur	mber for all lots wit	thin 250' of subject property.
13. This property is ☐ is not ☐ within 500' of an ad	joining municipalit	y.
14. Estimated time needed for presentation:		
I hereby certify that the above information herewith is correct and all of th		

1. If the applicant is unable to obtain the signature of the property owner, a letter of authorization signed by the property owner may be submitted instead, as per §43-3.3

Applicant's Signature (If different than owner)

Owner's Signature ( Must be signed )